

BOOK REVIEWS

Lipids and the Kidney. Contributions to Nephrology

Vol. 120 edited by W.F. Keane, W.H. Horl and B.L. Kasiske
Karger AG, Basel, Switzerland, 1997. No. of pages 234. Price US \$199.25. ISBN 3-8055-6389-2

Diabetic nephropathy has been a hot topic for the last few years: the link between nephropathy and large vessel disease has become more and more obvious; similarities between the mesangial cell and vascular smooth muscle cell have been increasingly recognized; tantalizing suggestions that blood lipids may have a role in the initiation and progression of diabetic nephropathy, and may thus at least in part account for the link between nephropathy and vascular disease, have been made in recent literature. So I approached this book with a great deal of interest and enthusiasm.

The editors are well known for their work in this area and for their enthusiastic support for the primary role that lipids may play in the initiation and progression of renal disease. They have assembled a cohort of well-respected, active researchers to contribute to this volume. The format of the book is of small, self-contained chapters which focus on individual, specific areas in a great deal of detail. This makes the book easy to dip into in small chunks. However, there is considerable overlap and the lack of cross-referencing from one chapter to another makes this approach rather less valuable than it might be. There are a reasonable number of figures and tables to lighten the text, and a satisfactory index.

The book is divided into four sections. The first deals with lipids as a risk factor for renal disease and the second with the treatment of dyslipidaemias in patients with renal disease. However, it rapidly becomes obvious that our current knowledge of lipids and the kidney is relatively limited: the introductory sections of many of the chapters are very similar, with much repetitious referencing of the sentinel papers. Several chapters focus on extreme models of renal disease, such as the albuminuric rat, or on very rare clinical entities, for example lipoprotein glomerulopathy. Although these may be good tools to explore disease mechanisms, no attempt is made to put these rarities into perspective and to explain their relevance to more common disease processes. This rather single-minded approach pervades the whole book: one chapter is devoted solely to a report of the author's work, with no reference being made to other published

work in the same field or to put the work into context.

The third and fourth sections covering mechanisms of lipid-induced injury and the effects of lipid-lowering drugs explore novel cellular pathways and are perhaps rather more interesting. There is a wealth of minute detail, but a considerable amount of overlap between chapters with no attempt to link concepts or different biochemical pathways together.

Only two chapters focus specifically on diabetes: one explores the role of cholesterol as a predictor of progression of diabetic nephropathy and the other the effect of lipid-lowering agents on progression of nephropathy in Type 2 diabetes. Both chapters comprehensively review the limited evidence in the field, acknowledge the shortcomings of the published work, and give a balanced overview.

Rather tighter editing would have benefited the book in other ways. There is no consistency of style, and annoyingly some chapters use SI and some non-SI units, with no conversion factors being given. There is no overall summary to pull together all of the various disparate pieces of a very complex jigsaw, nor is any attempt made to assess the relative importance of individual areas. Overall, I was left with the impression of a lack of balance. This, plus the great detail in individual sections, probably limits the usefulness of the volume for the reader without prior specialist knowledge. This is a book to dip into in order to explore in some detail a particular, small aspect of a large and complex subject, rather than to obtain a clear overview.

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The Economics of Diabetes and Diabetes Care

Edited by W. Gruber, T. Lander, B. Leese, T. Songer, R. Williams.
International Diabetes Federation, Brussels, 1997. No. of pages 136. Softback. ISBN 2-930229-01-2.

In a Utopian world with endless resources, all people throughout the world would have unlimited access to healthcare. This is obviously not the case. In the real world of limited resources, decisions need to be made about priorities in health care. Options might range from decisions on whether to refuse funding for entire health programmes such as fertility treatment, or at a more disease-specific level, making clinical decisions about the cost-effectiveness of alternative treatments for the revascularization of a diseased limb. Economic

issues in diabetes are complicated by the diverse nature of diabetes as a metabolic disease with a wide variety of costly complications. Intervention for one will usually have implications for another; for example, intensive insulin therapy will effect the rate of progression to disease end-points for all of the main complications associated with diabetes. Our understanding of some of the macro-economic effects of diabetes is impeded by the lack of reliable data describing these effects in populations. Against this background, *The Economics of Diabetes and Diabetes Care* is an account and description of our present understanding of the economic issues in diabetes, not just in more affluent countries but on a global basis.

The book is A4 size and structured in a clear and concise fashion. The authors have presumed that the reader has little or no understanding of health economics and first give a brief, non-patronising and authoritative overview of the discipline and its principal concepts.

As the authors point out, costs of disease do not only relate to the financial cost of care to specific health systems. Costs are accrued at a variety of levels including the individual in terms of changes in diet and life style and other effects such as time taken off work to receive care. This notion is emphasized by the authors because it is particularly important in chronic diseases such as diabetes. They then describe the economic literature available in relation to the main regions of the world. To their credit, they do not allocate space in direct proportion to the quantity of economic literature available from each region, in which case the book would have been swamped by Europe and North America. They give equal or even more space to poorer and less well-researched areas of the world. The authors give a list of common macroeconomic parameters for each area and they have filled gaps by personal communications with authoritative experts from these regions. The authors—who constitute many of the main players in the field—then discuss research priorities.

In researching and writing this book, the authors have taken on an extremely difficult task, to produce a well-written, well-referenced and a comprehensive guide to the subject area. It will not only be useful to those of us with an interest in the economics of diabetes but also to planners and administrators involved with the allocation of health resources at local, national and international levels. It will also be a useful addition to my personal library.

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